



# City of Carlsbad

## Housing & Redevelopment Department

### HOUSING LISTING FORM

Dear Owner/Agent:

If you wish to list your property through the Carlsbad Housing Agency, please complete and return this form by mail or fax. This unit will remain on the listing until you notify us otherwise.

Contact Name: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ Evening: \_\_\_\_\_

Email Address: \_\_\_\_\_

Number of Bedrooms: \_\_\_\_\_ Number of Bathrooms: \_\_\_\_\_

Proposed Rent: \_\_\_\_\_ Deposit: \_\_\_\_\_

Date \_\_\_\_\_ of \_\_\_\_\_ Availability: \_\_\_\_\_

Address of Unit: \_\_\_\_\_ Carlsbad, CA \_\_\_\_\_

If you have any questions, please feel free to contact our office at 760/434-2810.

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